AUTOMOBILE SERVICE CORPORATIONS

AUTO MO BILES ERVICE CO RPORATION N.	AME:	Certificate of Authority Number:		
REQUIRED FILINGS IN THE STATE OF:	ALASKA	Filings Made During the Year 2017		

(1) Check- list	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*		(5) DUE DATE	(6) FORM SOURCE	(7) APPLICABLE NOTES
		**	Domestic	Foreign			
		I. FINANCIAL STATEMENTS					
	1	Unaudited Financial Statement	1	1	3/1	Company	Note K
	2	Quarterly Financial Statement	1	XXX	5/15, 8/15, 11/15	Company	Foreign: File if required by director
		I. AUDITED FINANCIAL STATEMENTS					
	3	Audited Financial Statement	1	1	6/1	Company	Can be filed by 3/1 in lieu of unaudited Financial Statement
		II. STATE REQUIRED FILINGS					
	4	Annual Premium Tax Payment		_	3/1	State	Note D
	5	Annual Premium Tax Report	1	1	3/1	State	
	6	Bond Continuation Certificate	1	1	Annually when last certificate expires	Other	
	7	Designation of Persons to Contact	1	1	ONLY IF CHANGED	State	ONLY IF CHANGED
	8	Designation of Person to Receive Service of Process	1	1	ONLY IF CHANGED	State	ONLY IF CHANGED
	9	Filings Checklist (with Column 1 completed)	XXX	XXX	none	State	For corporation use only
	10	Quarterly Tax Payments			5/31, 8/31, 11/30	State	Note L
	11	Quarterly Tax Reports	1	1	5/31, 8/31, 11/30	State	Note L
	12	State Filing Fees			3/1	State	Note C

^{*}If xxx appears in this column, this state does not require this filing,

 $^{** \} A laska \ Administrative \ Code \ 3 \ AAC \ 21.485 - Filings \ required \ for an \ automobile \ service \ corporation.$

	NOTES AND INSTRUCTIONS					
A	Required Filings Contact Person:	Rebecca Nesheim, Tax Auditor (907) 465-2584 rebecca.nesheim@alaska.gov				
В	Mailing Address:	Corporation Financial Filings:	Chief Financial Examiner Alaska Division of Insurance 550 West 7 th Avenue, Suite 1560 Anchorage, AK 99501-3567			
		Annual Premium Tax Report: Express Mail: 333 Willoughby Ave. 9 th floor Juneau, AK 99801	Tax Auditor Alaska Division of Insurance P. O. Box 110805 Juneau, AK 99811-0805			
		Preferred: OPTins for tax report and payment				
С	Mailing Address for Filing Fees:	Fees must be paid by the Automated Clearing House payment method. The Annual Premium Tax Report includes the \$100 Annual Statement Filing Fee and \$2,250 Certificate of Authority Continuation Fee. Preferred is to pay via OPTins through the NAIC				
D	Mailing Address for Premium Tax Payments:	Taxes must be paid by the Automated Clearing House payment method. The Annual Premium Tax Report is to be filed at the address in Note B. Preferred is to pay via OPTins through the NAIC				
Е	Delivery Instructions:	All filings must be postmarked no later than indicated due date. If due date falls on a weekend or holiday, then the deadline is extended to the next business day. Preferred is to file annual premium tax report and attachments via OPTins through the NAIC				
F	Late Filings and Payments:	Late Financial Statement Filings Penalty: \$100.00 for each day the corporation fails to file in the form required and within the time established to the director. Late Tax Payment Penalty: \$50 per month plus five percent of the tax due per month up to a maximum of \$250 plus 25 percent of the tax due and interest of one percent per month. If not paid by the Automated Clearing House payment method, a penalty of 25 percent of the tax due, with a minimum of \$100 and maximum of \$2,000.				
G	Original Signatures:	Two original signatures of officers required on all filings for domestic corporations. Facsimile accepted for foreign corporations.				
Н	Amended Filings:	Amended filings must be filed within 30 days of completion along with an explanation of the amendment and submitted in the same format to the same address as the original filing.				
Ι	Exceptions from normal filings:	Letter to Chief Financial Examiner, Alaska Division of Insurance, 550 W. 7 th Avenue, Suite 1560, Anchorage, AK 99501-3567				
J	Filings new, discontinued or modified materially since last year:	None				
K	Unaudited Financial Statement	Example: I,(printed name),(printed name), attached Financial Statements have be and correct statements of the assets an of(Name of Automot Corporation) as of December 31, /Signed Name/	(title), hereby certify that the en prepared on a GAAP basis and are true ad liabilities and of the condition and affairs bile Service			
L	Quarterly Tax Reports and Estimated Tax Payments:	If the 2016 tax was \$10,000 or more, the corporation is required to make estimated quarterly tax payments throughout 2017, preferred is via OPTins . See Note F for late payments.				
M	Division of Insurance Web Site:	www.insurance.alaska.gov				

General Instructions For Corporations to Use Checklist

Column (1) (Checklist)

Corporations may use the checklist to identify what documents the state requires. Alaska does not want a copy of this checklist.

Column (2) (Line #)

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) (Required Filings)

Name of item or form to be filed.

Column (4) (Number of Copies)

Indicates the number of copies that each foreign or domestic corporation is required to file for each type of form.

Column (5) (Due Date)

Indicates the date on which the corporation must file the form.

Column (6) (Form Source)

This column contains one of three words: "State," "Company" or "Other." If this column contains "State," the state will make the forms available online with the filing instructions. If this column contains "Company," the corporation, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions. If the column says "Other" the form must be obtained from other required source.

Column (7) (Applicable Notes)

This column contains references to the Notes and Instructions that apply to each item listed on the checklist. The corporation should carefully read these notes <u>before</u> submitting a filing.